

3652

| AMENDMENT TRANSMITTAL LETTER (Large Entity) Applicant(s): Chul-Hwan Choi et al. | | | | Docket No. SEC.890 |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------|--------------------------------|------------------------|
| Serial No. 10/050,104 | Filing Date 01/18/2002 | PATENT & TRADEMARK OFFICE | Examiner T. Braham | Group Art Unit 3652 |
| Invention: SELF-CONTAINED SEMICONDUCTOR DEVICE MANUFACTURING EQUIPMENT HAVING COMPACT ARRANGEMENT OF LOAD-LOCK AND PROCESSING CHAMBERS | | | | |
| <u>TO THE COMMISSIONER FOR PATENTS:</u> | | | | |
| Transmitted herewith is an amendment in the above-identified application. | | | | |
| The fee has been calculated and is transmitted as shown below. | | | | |
| CLAIMS AS AMENDED | | | | |
| | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST # PREV. PAID FOR | NUMBER EXTRA CLAIMS PRESENT | RATE |
| TOTAL CLAIMS | 1 - | 20 = | 0 | \$18.00 |
| INDEP. CLAIMS | 1 - | 3 = | 0 | \$86.00 |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/> | | | | |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT \$0.00 | | | | |
| <p><input checked="" type="checkbox"/> No additional fee is required for amendment.</p> <p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____</p> <p><input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0238</p> <p><input type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.</p> <p><input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</p> | | | | |
|  <i>Signature</i> RECEIVED FEB 20 2004 GROUP 3652 | | | | |
| Dated: FEBRUARY 13, 2004 | | | | |
| <p>ADAM C. VOLENTINE REG. NO. 33289</p> <p>VOLENTINE FRANCOS, PLLC 12200 SUNRISE VALLEY DRIVE, SUITE 150 RESTON VA 20191</p> <p>TEL. NO. (703) 715-0870</p> <p>I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</p> <p><i>Signature of Person Mailing Correspondence</i></p> <p><i>Typed or Printed Name of Person Mailing Correspondence</i></p> | | | | |

CC: